

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>[Signature]</i>	900	06/29/07
RESPONSE FORMALITY REVIEW	<i>[Signature]</i>	809	10-14-07

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral).... Canceled A Appeal
 + Restricted O Objected

Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions
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